



Texas Brain Injury **RESOURCE DIRECTORY**

FIRST EDITION

www.biausa.org/Texas



The Voice of **Help, Hope and Healing**



Expanding Our Continuum of Care

For more than 35 years, you've come to know Baylor Scott & White Institute for Rehabilitation as the first choice for traumatic brain injury (TBI), spinal cord injury (SCI), stroke, or orthopedic and neuro rehabilitation. Now we're adding a new service to our continuum of care: Neuro Transitional Rehabilitation.

This new facility is designed to help patients with physical, behavioral and cognitive impairments who are at high risk for unsafe discharge restore their independent living skills, with the goal of safely functioning in their home and community.



For more information visit
BSWRehab.com/NeuroTransitional or call 214.820.9300
3601 Swiss Avenue | Dallas, TX 75204

Acute Care Therapy | Inpatient Rehabilitation | Neuro Transitional | Outpatient Therapy | Home Health

Photography may include models or actors and may not represent actual patients. Physicians provide clinical services as members of the medical staff at Baylor Scott & White Institute for Rehabilitation and are neither employees nor agents of Baylor Scott & White Institute for Rehabilitation, Baylor Health Care System, Scott & White HealthCare, Baylor Scott & White Health, Select Medical Corporation or any of their subsidiaries or affiliates. Baylor Scott & White Institute for Rehabilitation is part of a comprehensive inpatient and outpatient rehabilitation network formed through a joint venture between Baylor Institute for Rehabilitation at Dallas Baptist Hospital and Select Physical Therapy Texas Limited Partnership (SLTP), ©2016 Baylor Scott & White Health.



**BRAIN INJURY
ASSOCIATION**

OF AMERICA - TEXAS DIVISION



Texas Brain Injury **RESOURCE DIRECTORY**

FIRST EDITION

www.biausa.org/Texas



The Voice of **Help, Hope and Healing**

THE BRAIN INJURY ASSOCIATION OF AMERICA – TEXAS DIVISION

The Texas Brain Injury Resource Directory provides information and resources available to individuals with brain injuries. The fluid nature of services and service providers makes it likely that contact information and service availability will change and that some services and/or providers may not be included. It is the responsibility of the user to verify and investigate services and providers to determine the best options for your individual situation.



Brain Injury Association of America – Texas Division
P.O. Box 95234
Grapevine, TX 76099
www.biausa.org/Texas

For brain injury information, personal assistance in identifying brain injury programs and related services, and information about support groups, please contact the BIAA-TX Brain Injury Information Center toll-free at 1-800-444-6443.



Brain Injury Association of America, Inc.
1608 Spring Hill Rd., Ste. 110
Vienna, VA 22182
www.biausa.org
National Brain Injury Information Center: 1-800-444-6443

Copyright ©2019 by Brain Injury Association of America, Inc. All rights reserved. Except as permitted under the United States Copyright Law of 1976, no part of this publication may be reproduced or distributed in any form or by any means, or stored in a database or retrieval system, without the written permission of the Brain Injury Association of America, Inc.

Disclaimer

The Brain Injury Association of America, Inc. (hereafter BIAA) and its Texas Division (hereafter BIAA-TX) have created this directory as a service to those in need of brain injury information and services. This directory includes paid advertising. BIAA and BIAA-TX do not endorse, recommend, or guarantee any services or service providers listed in this directory and are not liable or responsible for any claim, losses, or damages resulting from use of the agencies or services listed within this directory. The information contained in this directory is believed to be accurate but is not guaranteed. All content is provided "as is" without any warranty, expressed or implied. BIAA and BIAA-TX disclaims liability for any errors or omissions and disclaims any implied warranty or representation of accuracy or completeness in this directory.

TABLE OF CONTENTS

The Brain Injury Association of America – Texas Division (BIAA-TX)	4	Brain Injury Programs	22
Resource Facilitation		Acute Rehabilitation	
Support Groups		Post-Acute Rehabilitation	
Social, Recreation, and Outreach Programs		Sub-Acute Rehabilitation	
Advocacy		Day Treatment (Day Rehab or Day Hospital)	
Community and Individual Events to Raise Awareness		Outpatient Therapy	
About Brain Injury	5	Legal Issues After Brain Injury	23
Brain Injury Definitions		Attorneys and Legal Assistance	
Acquired Brain Injury (ABI)		Independent and Community Living	
Traumatic Brain Injury (TBI)		Medical Equipment and Supplies	
Concussion		Assistive Technology and Adaptive Equipment	
Stroke		Hospitals in Texas	25
Texas Brain Injury Support Groups	6	Level I – Comprehensive Trauma Center	
Brain Injury Fundamentals Certificate	17	Level II – Major Trauma Center	
Insurance and Financial Assistance	17	Level III – Advanced Trauma Center	
Texas Law Regarding Brain Injury Rehabilitation		Level IV – Basic Trauma Center	
Affordable Care Act		Housing	28
Medicare		Transportation	28
Social Security Income		Veterans Services	29
Social Security Administration Offices in Texas		Appendix A	30
Aging and Disability Resource Centers		Guiding Principles When Selecting a Brain Injury Rehabilitation Program	
Waiver Programs		Appendix B	31
2-1-1 Texas		Questions to Make Informed Decisions and Monitor Brain Injury Services	
State of Texas Brain Injury Programs, Agencies, and Services	20	Appendix C	38
Comprehensive Rehabilitation Services (CRS) Program		Guide to Selecting Representation	
Long Term Care Services		Appendix D	40
Office of Acquired Brain Injury		Applying for Disability Benefits After Brain injury	
Texas Brain Injury Advisory Council			
Workers’ Compensation			
Crime Victims’ Compensation			
Employment and Vocational Assistance			
Ticket to Work Program			

THE BRAIN INJURY ASSOCIATION OF AMERICA – TEXAS DIVISION (BIAA-TX)



Brain Injury Association of America – Texas Division

P.O. Box 95234

Grapevine, TX 76099

Website: www.biausa.org/Texas

For brain injury information and resource information, contact BIAA's National Brain Injury Information Center toll-free at 1-800-444-6443 Monday to Friday, 9 a.m. to 5 p.m.

The Brain Injury Association of America, Inc. (BIAA) is the country's oldest and largest nationwide brain injury advocacy organization. BIAA advances awareness, research, treatment, and education and works to improve the quality of life for all people affected by brain injury. We are dedicated to increasing access to quality health care and raising awareness and understanding of brain injury. We are the voice of brain injury.



Through our direct affiliation with the Brain Injury Association of America, we are able to build our voice throughout the Lone Star State with constant support from the nation's oldest and largest nationwide brain injury advocacy organization.

BIAA-TX serves people of all ages who have sustained a traumatic or acquired brain injury from all causes, including:

- Aneurysm and arteriovenous malformation (AVM)
- Anoxia
- Brain tumor
- mTBI/Concussion
- Fall
- Hypoxia
- Hydrocephalus
- Ischemia
- Meningitis, encephalitis, and infections of the brain
- Poisoning/Neurotoxic injury
- Sports injury
- Stroke
- Surgery
- Concussion

BIAA-TX offers free personalized information, direction to available services, and support through the Texas Brain Injury Information Center. A toll-free phone call connects persons with a brain injury, family members or friends, professionals, and the public with an experienced brain injury specialist.



BIAA-TX thanks Avanir Pharmaceuticals for their generous support.

RESOURCE FACILITATION

Resource facilitation is more intensive than the information and resource information provided through the Brain Injury Information Center. BIAA-TX is working with the Texas Brain Injury Advisory Council to implement a Family Navigator program, which will utilize a network of volunteers around the state who are willing to offer personalized feedback and information unique to an individual's brain injury or situation. Until the Family Navigator program officially launches in 2020, please feel free to contact the Brain Injury Information Center (1-800-444-6443) for answers to any questions regarding brain injury and available resources in the state.

SUPPORT GROUPS

Brain injury support groups exist throughout Texas and serve to help individuals with brain injury and their families to know that they are not alone. Being part of a strong local support network makes a huge difference in coping after you or a loved one sustains a brain injury. BIAA-TX helps link people with the support groups that are available through the Texas brain injury community.

SOCIAL, RECREATION, AND OUTREACH PROGRAMS

BIAA-TX plans community events, such as Bowling for Brain InjurySM and Walks for Brain Injury, that offer individuals a way to help to raise awareness of brain injury as well as funds to support the services offered through the Texas Division. Check out the event calendar at www.biausa.org/Texas for details. If you are interested in holding an event to raise awareness and funds for brain injury in Texas, please e-mail to: development@biausa.org

ADVOCACY

BIAA-TX fosters statewide advocacy to help the brain injury community work together toward services, supports, and funding needed by persons with brain injury and their families. Our staff and volunteers actively lobby for improved access to care and additional resources for people with brain injury. If you would like more information or wish to get involved, please visit the Texas Division's website at www.biausa.org/Texas.

ABOUT BRAIN INJURY

Brain injury is a major cause of death and disability in the United States. People who survive a brain injury face effects lasting from a few days to disabilities that last the rest of their lives. The severity of damage to the brain is a key factor in how a person will be affected after brain injury. The severity of a brain injury is classified as mild, moderate, or severe based in part on whether there is a loss of consciousness and how long one is without consciousness.

Brain injury affects who we are and the way we think, act, and feel. It can change everything about a person in a matter of seconds. The effects of a brain injury are often unpredictable and complex. They vary greatly from person to person; just as no two brains are alike, no two brain injuries are the same. The effects of an injury depend on multiple factors including cause, physical location, and severity. Changes can be temporary or permanent, causing mild impairment or a complete inability to perform a function. Each part of the brain serves a specific function and links with other parts of the brain to perform complex functions.

Brain injury can result in physical impairments (e.g., speech, vision, hearing, headaches, paralysis, seizures, fatigue and more), cognitive issues (like memory deficits, impaired concentration, slowed thinking, limited attention span, and trouble with perception, planning, writing, reading, and judgment), and emotional problems (such as mood swings, anxiety, depression, restlessness, lack of motivation, and difficulty controlling emotions).

Regardless of the severity of a brain injury, the early hours, days, and weeks after injury can be confusing. A "good" day of progress may be followed by a "down" day. Setbacks are common and do not necessarily imply a permanent reversal. Individuals with brain injuries may not be fully aware of the impact of his or her injuries. Recovery is often an unpredictable process involving time, specialized brain injury therapies and services, and family/community support.

After a brain injury, family and friends become an integral part in the lifelong journey of the survivor. Learning a new language filled with medical and rehabilitation terms is necessary to understand what happened and what services are available, as well as how they help persons with brain injury recover. Digesting information on the outcome of the brain injury, making the right decisions for accurate treatment for a successful recovery, acquiring benefits, planning for the future, and accepting this new situation can be very stressful on all involved.

The Texas Brain Injury Resource Directory lists resources available to Texans who have experienced brain injury as well as their families to assist in navigating through the maze of services. The Brain Injury Association of America's website, www.biausa.org, is also an excellent resource for information.

BRAIN INJURY DEFINITIONS

ACQUIRED BRAIN INJURY (ABI)

An acquired brain injury is an injury to the brain, which is not hereditary, congenital, degenerative, or induced by birth trauma. An acquired brain injury is an injury to the brain that has occurred after birth. Common causes of ABI include stroke, near drowning, hypoxic or anoxic brain injury, tumor, neurotoxins, electric shock or lightning strike.

TRAUMATIC BRAIN INJURY (TBI)

A traumatic brain injury (TBI) is defined as an alteration in brain function, or other evidence of brain pathology, caused by an external force. Common causes of a TBI include gunshot wounds, motor vehicle crashes, sports injuries, assaults, and falls.

CONCUSSION

A concussion is a type of TBI caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move rapidly back and forth. This sudden movement can cause the brain to bounce around or twist in the skull, stretching and damaging the brain cells and

creating chemical changes in the brain.

A concussion may be called a mild traumatic brain injury (mTBI) because concussions are usually not life threatening. Even so, the effects of a concussion can be serious. Concussions can occur in any sport or recreational activity, from falls or other activities where a bump, blow or jolt to the head occurs. Concussion may or may not involve loss of consciousness, can result in memory loss for events immediately before or after trauma, and can result in neurological deficits that may or may not be transient. Concussion is not always recognized as a brain injury. It is not always diagnosed and subsequent problems that a person may have are not always associated with the concussion. For more information about concussion, visit biausa.org/Concussion.

STROKE

A stroke occurs when blood flow to the brain is interrupted and the brain does not get the oxygen it needs, often with devastating consequences. A stroke may be hemorrhagic, caused by a burst blood vessel in the brain, or ischemic, caused by a blood clot that blocks blood flow to part of the brain. Some people experience TIAs (transient ischemic attacks) or "mini-strokes" that result from a temporary blood clot. A TIA is often a warning sign that a stroke is likely to occur and should be taken seriously. While a stroke is most common in older adults, children and young adults also experience strokes. The severity of a stroke is often assessed using the National Institutes of Health (NIH) Stroke Scale.

TEXAS BRAIN INJURY SUPPORT GROUPS

Support groups are a great resource for individuals with brain injury, family members, and caregivers to share with and learn from others who face similar challenges. Each support group is different because it serves to meet the needs of those participating at any given time. Support groups may include presentations about various aspects of brain injury, opportunities to share experiences and get support

or suggestions from others in the group, social or recreational activities, and more.

Please note that contacts, dates and times frequently change; please check the BIAA-TX website at www.biausa.org/Texas or contact those listed below to confirm the date, location, and time of a group in which you are interested.

CENTRAL TEXAS

• **Austin – Seton Brain, Spine, and Stroke Support Group**

700 West 45th St.
Austin, TX 78751

Third Wednesday of the month, 3-4 p.m.
Central Texas Rehab Hospital,
First Floor Training Room

Special Details: Please RSVP

Contact: Marcie Wilson
Phone: 512-324-8948
Email: mwilson@seton.org

• **Austin – Stroke Support Group**

1400 N IH 35, Ste. 310
Austin, TX 78701

Second Wednesday of the month, 3-4 p.m.
Clinical Education Center Brackenridge,
Room C1.204 (First Floor)

Special Details: Please RSVP

Contact: Marcie Wilson
Phone: 512-324-8948
Email: mwilson@seton.org

• **Austin – Mary Lee Foundation Groups Brain Injury Lecture and Discussion**

1327 Lamar Square Dr.
Austin, TX 78704

Second Tuesday of the month, 7-8:30 p.m.
Mary Lee Foundation Community Center

Contact: Chip Howe
Phone: 512- 443-5777
Email: chiphowe@maryleefoundation.org
Website: www.maryleefoundation.org

• **Austin –Brain Injury Support Group**

1327 Lamar Square Dr.
Austin, TX 78704

First Tuesday of the month, 7-8:30 p.m.

Music Jam Session, 6-7 p.m.

Mary Lee Foundation Community Center

Contact: Calysta Bartley or Elizabeth Morris

Phone: 512-216-0770 (Calysta)

822-725-1350 (Elizabeth)

Website: www.maryleefoundation.org/programs-and-services/brain-injury-program/free-brain-injury-groups

• **Austin – “Team LUK3” Children with Brain Injury**

1106 West Dittmar Rd.
Austin, TX 78745

Fourth Wednesday of the month, 6:30-8:30 p.m.
Texas NeuroRehab Center, Administration Building

Special Details: Please RSVP to ronda@teamlukehopeforminds.org and include the number of people attending and the ages of the siblings attending. Snacks and drinks provided.

Contact: Ronda Johnson

Phone: 512-845-1466

Email: ronda@hope4minds.org

Website: www.teamlukehopeforminds.org

• **Austin – Central Austin Stroke Support Group**

1005 E 32nd St.
Austin, TX 78705

Second Monday of the month, 4:30-6 p.m.

St. David's Medical Office Building,
Fifth Floor, Rooms A&E

Contact: Allison Hanschen

Phone: 512-544-5757

Email: allison.hanschen@stdavids.com

- **Austin – Mentis Brain Injury/Stroke Support Groups**

1106 W. Dittmar Rd.
Austin, TX 78745

Fourth Wednesday of the month, 6:30 p.m.
Mentis Neuro Austin

Special Details: Two support groups are run simultaneously. Session A is for the person who has sustained a brain injury or has had a stroke. Session B is for the family, friends, and/or caregivers of those who have sustained a brain injury or who have had a stroke. The groups are free and open to the public. Led by Lori Wright, Ph.D.; Mendi West, LCSW; and Austin Sheffield, M.A., CBIS.

Contact: Austin Sheffield
Phone: 512-792-4087
Email: asheffield@mentisneuro.com

- **Georgetown – Survivors of Stroke**

4945 Williams Dr.
Georgetown, TX 78633

Every Thursday, 3:30-5 p.m.
Baylor Scott & White Georgetown (Sun City Clinic)

Special Details: Search for support groups on their website under "Find a Class or Event." If not listed, call mainline to inquire.

Contact: Laura Trela
Phone: 512-509-0500
Website: www.sw.org/event-search

- **Lakeway – Stroke Support Group**

2000 Medical Dr.
Lakeway, TX 78734

Every Thursday, 2-3 p.m.
Vibra Rehab Hospital of Lake Travis
Meets on second floor family lounge.

Phone: 512-263-4500

- **Round Rock – Brain Trauma Support Group**

2400 Round Rock Ave.
Round Rock, TX 78681

Second Wednesday of the month, 6:30-8 p.m.
Round Rock Medical Center, Classroom 3, First floor

Contact: Jackie Theaker
Phone: 512-341-6802
Email: jacquelyn.theaker@stdavids.com

- **Temple – Central TX Brain Injury Support Group**

2401 S. 57th St.
Temple, TX 76504

Last Tuesday of the month, 6:30-7:30 p.m.
Grace Presbyterian Church

Contact: Kyla Sherrard
Phone: 254-724-4749
Email: kyla.sherrard@BSWhealth.org

- **San Marcos – HOPE for Stroke & Brain Injury Survivors Support Group**

1301 Wonder World Dr., #2100
San Marcos, TX 78666

Second and fourth Monday of the month, 1-2:30 p.m.
Central Texas Medical Center –
Professional Building #102

Special Details: Call for info/directions

Contact: Abby Bostick
Phone: 512-753-3818
Email: abby.matthews@ahss.org
Website: www.ctmc.org/education-events/class-event-calendar

NORTH TEXAS/DFW

- **Allen – Warm Springs Rehabilitation Hospital Brain Injury Support Group**

1001 Raintree Circle
Allen, TX 75013

Second Saturday of the month, 1-2 p.m.
Warm Springs Main Conference Room

Special Details: Run by the Neuropsychology Department

Contact: Felicia Carvalho
Phone: 972-908-2000 (main hospital number)

- **Arlington – Medical Center Arlington Stroke Support Group**

3301 Matlock Rd.
Arlington, TX 76015

Third Saturday of the month, 2 p.m.
Medical Center of Arlington, Hospital Cafeteria-PDR

Contact: Rachel
Phone: 682-509-6848

- **Arlington – Coping w/ Life Support Group**

Phone: 214-263-3029
Email: jenniferd777@gmail.com

- **Dallas – Dallas ABI Support Group**

5151 Harry Hines Blvd.
Dallas, TX 75390
First Tuesday of the month, 6:30-8 p.m.
Zale Lipshy University Hospital, Conference Room 1
Contact: Karen Brewer-Mixon, Ph.D.
Phone: 214-648-1750
Email: karen.brewer@utsouthwestern.edu

- **Denison – Texoma Medical Center Stroke/Brain Injury Support Group**

1200 Reba McEntire Ln.
Denison, TX 75020
Third Thursday of the month, 2-3 p.m.
Reba's Rehab
Contact: Jenny Reeves
Phone: 903-416-5070
Email: jenny.reeves@thcs.org

- **Denton – Denton Brain Injury Support Group**

3535 S. IH-35 E, Ste. 103B
Denton, TX 76210
Every 6 weeks on Wednesday, 5-6:30 p.m.
Denton Regional Medical Center,
Professional Building, Community Room
Contact: Carolyn Williams
Phone: 940-384-3970
Email: carolyn.williams@hcahealthcare.com

- **Denton – Select Rehab Hospital Stroke & Amputee Support Group**

2620 Scripture St.
Denton, TX 76201
Second Thursday of the month, 6-7:30 p.m.
Select Rehab
Contact: Tracy Miller
Phone: 940-536-7097
Email: tracmiller@selectmedical.com

- **Ft. Worth – HOPE After Brain Injury**

8200 Anderson Blvd.
Fort Worth, TX 76120
Second Tuesday of the month, 1-2:30 p.m.
Contact: Dr. Deana Adams, LPC
Phone: 817-983-1087
Email: admin@hopeafterbraininjury.org
Website: www.hopeafterbraininjury.org

- **Ft. Worth – Stroke Folks**

425 Alabama Ave.
Fort Worth, TX 76104
Third Thursday of the month, 4 p.m.
Texas Rehab Hospital, Physical Therapy Gym
Contact: James Ryan
Phone: 817-250-3727
Email: jamesryan@texashealth.org
Website: www.texashealth.org/fortworth/Pages/
Patients-and-Visitors/Support-Groups.aspx

- **Ft. Worth – Fort Worth Acquired Brain Injury Support Group**

1301 Pennsylvania Ave.
Fort Worth, TX 76104
Second Thursday of the month, 1:30-3 p.m.
Texas Health Harris Methodist Hospital,
Therapy Services Dept.
Contact: Dorothy Conway
Phone: 817-250-2445
Email: dorothyconway@texashealth.org
Website: www.texashealth.org/fortworth/Pages/
Patients-and-Visitors/Support-Groups.aspx



Phone: 817-571-1323
Website: www.neurofitnessfoundation.org/
1361 West Eules Blvd. #101, Eules, TX 76040

- **Ft. Worth – Team LUK3/Hope for Minds**
6913 Camp Bowie
Ft. Worth, TX 76116
Fourth Wednesday, 6:30-8 p.m.
Neurological Recovery Center (NRCL)
Email: tim@teamlukehopeforminds.org
Website: www.teamlukehopeforminds.org
- **Ft. Worth – Baylor Scott & White Stroke Support Group**
1350 All Saints Ave.
Fort Worth, TX 76104
Second Tuesday of the month
Carter Rehabilitation and Fitness Center
Special Details: Free parking, no need to RSVP
Contact: Ashley Clark
Phone: 817-922-1980
- **Grapevine – Baylor Regional Medical Center at Grapevine**
1650 West College St.
Grapevine, TX 76051
Third Thursday every other month, 7 p.m.
Baylor Regional Medical Center at Grapevine,
Cafeteria
Contact: Anna Ostronoff
Phone: 817-329-2524
Email: aostronoff@bir-rehab.com
- **Irving – Irving Area Brain Injury Support Group**
1901 N MacArthur Blvd.
Irving, TX 75061
Second Wednesday of the month, 3-4 p.m.
Baylor Medical Hospital, Fifth Floor Rehab Unit
Contact: Renee Vickers, Inpatient Rehab Therapy
Manager
Phone: 972-579-8511
Email: renee.vickers@BSWHealth.org
- **McKinney – Stroke Support Group at the Medical Center of McKinney**
4500 Medical Center Dr.
McKinney, TX 75069
Second Wednesday of the month, 11 a.m. to 12:30 p.m.
Medical Center of McKinney, Classroom 3 and 4,
First Floor
Contact: Jennifer Mitchell
Phone: 972-548-5491
Email: jennifer.mitchell3@hcahealthcare.com
- **McKinney – McKinney Support Group**
1800 S. Stonebridge Dr.
McKinney, TX 75070
First Tuesday of the month, 7-8:30 p.m. and
Third Friday of the month, 10 a.m. to 12 p.m.
Stonebridge United Methodist Church
Contact: Adina and Karl Heller
Phone: 940-206-0269
Email: aheller80@aol.com
- **Mesquite – Mesquite Stroke Survivors & Caregivers Support Group**
929 N Galloway Ave.
Mesquite, TX 75149
Fourth Wednesday of the month, 6:30 p.m.
(Except in November and December)
Medical Arts Center, Second Floor Conference Room
*(Connected to Dallas Regional Hospital
by a sky-bridge)*
Contact: Dee Robinson
Phone: 214-402-4049
Email: mizdee.robinson@live.com
- **Plano – Different Strokes**
3901 W. 15th St.
Plano, TX 75075
First Monday of the month, 3 p.m.
Medical Center of Plano, Medical Building 2,
Rehab Unit Dining Room
Contact: Holly Henderson
Phone: 972-519-1407
Email: holly.henderson@hcahealthcare.com



Plano – Brain Injury Network of Dallas (B.I.N.D.)

Phone: 972-769-246

Website: www.thebind.org

• **Plano – Brain Injury Support Group**

2301 Marsh Ln.

Plano, TX 75093

First Friday of the month, 2 p.m.

Accel Rehabilitation Hospital,

Phone: 972-695-6495

• **Plano – Collin County Brain Injury Support Group**

First and third Tuesday of the month, 7 p.m.

Rotates to a local restaurant each month

Contact: Bill Yoder

Phone: 214-732-5685

• **Plano – Stroke Support Group**

2800 15th St.

Plano, TX 75075

First Thursday of the month, 12-1 p.m.

Encompass Health Rehab Hospital Plano

Contact: Donna Richardson

Phone: 972-333-7783

Email: donna.richardson@healthsouth.com

• **Plano – Grey Matters North Texas Brain Tumor Support Group**

2800 15th St.

Plano, TX 75075

Second Tuesday of each month, 7-9 p.m.

Encompass Health Rehabilitation Hospital of Plano

Website: www.greymatters.us/Meetings/default.html

• **Wichita Falls – Health South Stroke Group**

3901 Armory Rd.

Wichita Falls, TX 76302

Third Thursday of every month, 11:45 a.m to 1 p.m.

Contact: Linda Webb

Phone: 940-631-2794

Email: shellie.green@healthsouth.com

HOUSTON/GALVESTON AREA

• **Baytown – Houston Methodist San Jacinto Hospital Stroke Support Group**

5100 James Bowie Dr.

Baytown, TX 77520

First Thursday of the month, 5-6 p.m.

Houston Methodist San Jacinto Hospital,

Inpatient Rehab Dining Room

Contact: Vicki Chao

Phone: 281-428-3096

Email: lvictoria@houstonmethodist.org

• **Conroe – Mended Minds**

504 Medical Center Blvd.

Conroe, TX 77304

Second Wednesday of the month, 2:30-3:30 p.m.

Conroe Regional Medical Center-Auditorium

Contact: Tina Doffing

Phone: 936-538-2575

Email: tina.doffing@hcahealthcare.com

• **Houston – CHI Baylor St Luke's Stroke Support Group**

2491 South Braeswood Blvd.

Houston, TX 77030

Second Wednesday of the month, 6:30 p.m.

Radiation Therapy and Cyber Knife Bldg.

Special Details: Support group is facilitated by RNs, and features numerous topics and guest speakers.

Light food and refreshments are provided. Free surface parking is available.

Contact: Janine Mazabob

Email: Janine.Mazabob@dnvgl.com



- **Houston – Memorial Hermann Medical Center
Traumatic Brain Injury Support Group**

6410 Fannin St.
Houston, TX 77030

Second Thursday of the month, 6 p.m.
7 Jones Conference Room

Contact: Kim Vu
Phone: 713-222-2273
Email: supportgroup@memorialhermann.org

- **Houston – Memorial Hermann Medical Center
Hydrocephalus Support Group**

6410 Fannin St.
Houston, TX 77030

Second Saturday of the month, 2 p.m.
3 Hermann Conference Room

Contact: Kim Vu
Phone: 713-222-2273
Email: supportgroup@memorialhermann.org

- **Houston – Memorial Hermann Medical Center
Stroke Support Group**

6410 Fannin St.
Houston, TX 77030

Third Wednesday of the month, 2:30-4 p.m.
7 Jones Conference Room

Contact: Kim Vu
Phone: 713-222-2273
Email: supportgroup@memorialhermann.org

- **Houston – Memorial Hermann Medical Center
Brain Tumor Support Group**

6400 Fannin St.
Houston, TX 77030

Second Wednesday of the month, 6 p.m.
27th floor of Memorial Hermann Medical Plaza

Contact: Kim Vu
Phone: 713-222-2273
Email: supportgroup@memorialhermann.org

- **Houston – Memorial Hermann Medical Center
Brain Aneurysm Support Group**

6400 Fannin St.
Houston, TX 77030

Third Wednesday of the month, 6 p.m.
27th floor of Memorial Hermann Medical Plaza

Contact: Kim Vu
Phone: 713-222-2273
Email: supportgroup@memorialhermann.org

- **Houston – Memorial Hermann Medical Center
Epilepsy Support Group**

6400 Fannin St.
Houston, TX 77030

First Thursday of the month, 6 p.m.
27th floor of Memorial Hermann Medical Plaza

Contact: Kim Vu
Phone: 713-222-2273
Email: supportgroup@memorialhermann.org

- **Houston – Memorial Hermann Southwest Hospital
Stroke Support Group**

7600 Beechnut St.
Houston, TX 77074

Third Thursday of each month, 2-3 p.m.
Memorial Hermann Southwest Hospital,
Pavillion Classroom

Contact: Anila Nair
Phone: 713-456-5818
Email: anila.nair@memorialhermann.org

- **Houston – Houston Methodist Stroke Support Group**

5601 S. Braeswood Blvd.
Houston, TX 77096

First Thursday of the month, 6-7:30 p.m.
Evelyn Rubenstein Jewish Community Center
of Houston

Contact: Christy Dobbs, LCSW
Phone: 832-667-5867 or 713-441-9164
Email: cdobbs@houstonmethodist.org
Website: www.houstonmethodist.org/neurology/for-patients/patient-support

- **Houston – TIRR Stroke Support Group**

2455 S. Braeswood Blvd.
Houston, TX 77030

Second Wednesday of the month, 3 p.m.
TIRR Outpatient Therapy Center-Staff Lounge

Contact: Ellie Cammack
Phone: 281-871-9392
Email: elisa.cammack@gmail.com

- **Houston – Stroke of Hope Support Group**

3601 N. MacGregor Way
Houston, TX 77004

First Wednesday of the month, 1-2:30 p.m.
Quentin Mease Hospital, Second floor, Room 250

Contact: Jorge Neira
Phone: 713-873-4728
Email: jorge.neira@harrishealth.org

- **Houston – West Houston Stroke Warriors**

12606 West Houston Center Blvd., Ste. 180
Houston, TX 77082

Every Saturday, 10:30 a.m. to 12 p.m.
West Houston Medical Center Professional Building,
Outpatient Rehabilitation

Contact: Wanda Adams
Phone: 281-588-8517
Email: wanda.adams@HCAHealthcare.com
Website: www.houstonstrokewarriors.com



- **Galveston – Galveston County Epilepsy Awareness Support Group**

2412 61st St.
Galveston, TX 77551

Second Tuesday of the month, 6-8 p.m.
Odyssey Academy School Library

Contact: Pat Cade
Phone: 888-548-9716 ext. 210 or
(713) 789-6296 main number
Email: pcade@eftx.org
Website: <http://eftx.org/programs/support-groups>

- **Humble – Stroke Support Group-
Northeast Memorial Hermann**

9250 Pinecroft,
The Woodlands, TX 77380

Every Wednesday, 5-6 p.m.
Memorial Hermann the Woodlands Hospital, First
Floor Conference Center A and B

Special Details: Check periodically
Website: www.memorialhermann.org/classes-events

- **Kingwood – Stars**

22999 US Hwy 59,
Kingwood, TX 77339

Third Monday of odd months, 6-7 p.m.
Kingwood Medical Center, Kingwood
Community Room

Contact: Sandy Stephens
Phone: 281-348-8975
Website: <http://kingwoodmedical.com/service/stars-recurrent-strokes>

- **The Woodlands – St. Luke’s Health – The Woodlands Hospital**
17200 St. Luke’s Way
The Woodlands, TX 77384
Third Tuesday of the month, 6-7:30 p.m.
St. Luke’s The Woodlands Hospital
Special Details: Fifth floor, Activity Room across from the nurse’s station
Contact: Theresa Eshcete
Phone: 936-266-3284
Email: teschete@stlukeshealth.org
Website: www.chistlukeshealth.org/support-services-1237
- **Webster – Phases**
655 East Medical Center Blvd.
Webster, TX 77598
Second Thursday of the month, 2 p.m., Cafeteria
Contact: Courtney Keimig
Phone: 281-283-8708
Email: courtney.keimig@kindred.com
- **Webster – Bay Area Brain Injury Support Group**
760 Clear Lake City Blvd.
Webster, TX 77598
First Tuesday of the month, 6:30-8 p.m.
Gateway Community Church
Contact: Curtis Matthias
Phone: 713-805-7550
Email: curtmatthias@att.net
- **San Antonio Brain Tumor Support Group**
9119 Cinnamon Hill
San Antonio, TX 78420
Second Thursday of the month, 7 p.m.
Encompass Health Rehab Hospital of San Antonio
Contact: Teresa Zdansky
- **San Antonio – Alamo Head Injury Support Group**
9119 Cinnamon Hill
San Antonio, TX 78420
Fourth Wednesday of the month, 6-8 p.m.
Special Details: Please check the website as the meeting location changes every 3 months. The survivor portion of the group will consist of a speaker or planned activity. A licensed professional counselor (LPC) facilitates the family/caregiver portion of the group.
Contact: Kelly Quezada
Phone: 210-614-4323
Email: kelly@alamoheadinjury.org
Website: www.alamoheadinjury.org
- **San Antonio – Survivors of Stroke Club**
4502 Medical Dr.
San Antonio, TX 78229
Second Thursday of the month, 5-6 p.m.
Rio Tower First Floor Encino Conference Room,
University Hospital
Phone: 210-743-1364
Website: www.universityhealthsystem.com/calendar/stroke-support-group?esk=2016+stroke+support+group+2016+10+13

HILL COUNTRY/SAN ANTONIO

- **San Antonio – Alamo Area Stroke Support Group**
9119 Cinnamon Hill
San Antonio, TX 78420
Every Thursday (except holidays), 10-11:30 a.m.
Encompass Health Rehab Hospital of San Antonio
Contact: Santiago Casano
Phone: 210-764-2238
- **San Antonio – Baptist Health System Stroke Support Group**
288 Bitters Rd.
San Antonio, TX 78216
Third Wednesday of the month, 11:30 a.m. to 1 p.m.
BHS Health
Contact: Elizabeth Johnson
Phone 210-297-5192
Email: ejohnso1@baptisthealthsystem.com

- **Seguin – Guadalupe Regional Medical Center Stroke Support Group**

1215 E Court St.
Seguin, TX 78155

First Wednesday of the month, 3 p.m.
Guadalupe Regional Medical Center,
Inpatient Rehab Unit Dining Room

Contact: Nicole Villarreal
Phone: 830-401-7501
Email: brannanspeechtherapy@gmail.com

- **San Antonio – Warm Springs of Thousand Oaks Stroke Support Group**

14747 Jones Maltsberger Rd.
San Antonio, TX 78247

Second Thursday of every other month,
11 a.m. to 1 p.m., Cafeteria

Contact: Veronica Salas
Phone: 210-380-4214

- **Floresville – Connally Memorial Hospital Stroke Support Group**

499 10th St.
Floresville, TX 78114

Last Thursday of the month, 1 p.m.

In November and December, the group meets the week before the holidays.

Connally Memorial Hospital, Rehab Department,
Large Conference Room

Contact: Francine Dugi, PT
Phone: 830-393-5447

Email: f.dugi@hughes.net
Secondary Contact: Elia Sanchez
Email: sancheze@connallymmr.org

- **New Braunfels – New Braunfels Regional Rehabilitation Hospital Support Group**

2041 Sundance Parkway
New Braunfels, TX

Third Thursday of the month
New Braunfels Regional Rehabilitation Hospital

Phone: 830-643-7117
Website: nbrrh.ernesthealth.com

RIO GRANDE VALLEY

- **El Paso – Brain Injury Support Group**

4360 Doniphan Dr.
El Paso, TX 79922

Second Tuesday of the month, 6:30 p.m.
Mentis Neuro Rehab, Dining Room

Contact: Rosy Cabral
Phone: 915-319-9553
Website: [www.facebook.com/
TheElPasoBrainInjurySupportGroup](http://www.facebook.com/TheElPasoBrainInjurySupportGroup)

- **Edinburg – Stroke Support Club**

5403 Doctor's Dr.
Edinburg, TX 78539

Third Thursday of the month, 6-7 p.m.
The Rehab Center at Renaissance Hospital

Contact: Clarissa Cerda
Phone: 956-362-3550

- **Harlingen – HOPE Support Group**

2101 Pease St.
Harlingen, TX 78550

Third Tuesday of the month, 6-7:30 p.m.
Valley Baptist Medical Center-Harlingen,
Woodward Conference Center

Contact: erlinda Abantao
Phone: 956-389-1100, Stroke Department
Email: Erlinda.abantao@valleybaptist.net
Website: [www.valleybaptist.net/our-services/
brain-neuro](http://www.valleybaptist.net/our-services/brain-neuro)

- **Mission – Stroke Survivors Club**

900 S. Bryan Rd.
Mission, TX 78572

Third Thursday of the month, 3 p.m.
Mission Regional Medical Center,
Rehab Dining Room

Contact: Jose D Rios
Phone: 956-323-1003
Email: jr7425@missionrmc.org

CORPUS CHRISTI/COASTAL BEND AREA

- **Corpus Christi – Brain Injury Support Group**
600 Elizabeth St.
Corpus Christi, TX 78412
First Thursday of the month, 9:30-11 a.m.
Inpatient Rehab Floor, Solarium
Contact: Julianne Herrera
Phone: 361-881-3000, Ext. 14415
Email: julianne.herrera@christushealth.org
- **Corpus Christi – Brain Injury Support Group**
3315 S Alameda St.
Corpus Christi, TX 78411
Third Thursday of the other month, 11:30 a.m. to 1 p.m.
Corpus Christi Medical Center, Doctors Regional
Conference Center (Building in the back)
Contact: Pat Squirres
Phone: 361-877-5933
Email: pat.squirres@hcahealthcare.com
Secondary Contact: Shirley Ives
Phone: 361-452-6568

AMARILLO – LUBBOCK

- **Amarillo – The Second Life**
417 W. 10th Ave.
Amarillo, TX 79101
First Tuesday of the month, 5:30-7 p.m.
Panhandle Independent Living Center
Contact: Chelsie Haney
Phone: 806-374-1400
Email: chaney@panhandleilc.org
- **Lubbock – Stroke and Brain Injury Support Group**
4302 Princeton St.
Lubbock, TX 79415
Second Tuesday of the month, 4-5 p.m.
Contact: Scott Brown
Phone: 806-749-2222

EAST TEXAS

- **Texarkana – Health South Rehab Center Support Group**
515 West 12th St.,
Texarkana, TX 75501
One Thursday per month, 12 p.m.
See website for more details.
Encompass Health Rehabilitation Hospital
of Texarkana
Contact: Todd Wallace
Phone: 903-735-5039
Email: todd.wallace@healthsouth.com
Website: www.healthsouthtexarkana.com
- **Tyler – East Texas’ Hope and Love Brain Injury Support Group**
11937 U.S. Highway 271
Tyler, TX 75708-3154
Call/Email for schedule
UTHC, Cafeteria
Contact: Kristy Easley
Phone: 903-877-8724
Email: kristy.easley@neurorestorative.com





NOW AVAILABLE

BRAIN INJURY FUNDAMENTALS

LEARN MORE AT WWW.BIAUSA.ORG/FUNDAMENTALS

BRAIN INJURY FUNDAMENTALS CERTIFICATE

Brain Injury Fundamentals is a training and certificate program designed to address the unique needs and challenges of those who care for or encounter individuals with brain injury. This includes non-licensed direct care staff persons, facility staff, family members and friends, first responders, and others in the community. The mandatory training course covers essential topics such as:

- Cognition
- Guidelines for interacting and building rapport
- Brain injury and behavior
- Medical complications
- Safe medication management
- Families coping with brain injury

The Brain Injury Fundamentals course is grounded in adult learning principles, maximizing participant engagement and application through an interactive workbook. Using real-life scenarios to anchor the course concepts, participants learn about the challenges people face following brain injury and the types of support they need. This essential program will help candidates understand different types of behavior, manage medication safely, and provide support to families and friends. For more information, visit www.biausa.org/Fundamentals.

INSURANCE AND FINANCIAL ASSISTANCE

After a brain injury, assistance with paying for the costs of medical, rehabilitation, community and long-term care and other financial obligations is often necessary. Depending upon an individual's unique situation, one or more Federal and state options may be available to assist.

The best way to find out if you are eligible for any available program or benefit is to apply as soon after an injury as possible. If you are denied eligibility, be sure you understand why. Sometimes, amending the application or appealing the decision will be successful.

BIAA's Preferred Attorneys understand the complexities of brain injury. To locate Preferred Attorney in Texas, visit www.biausa.org/PreferredAttorneys.

TEXAS LAW REGARDING BRAIN INJURY REHABILITATION

The Brain Injury Association of America – Texas Division works diligently alongside other advocacy groups, such as the Texas Brain Injury Advisory Council and Texas Brain Injury Providers Alliance, to protect unique legislation and regulation which requires insurance companies to pay for comprehensive rehabilitation after brain injury. Specifically, the law in Texas states:

(a) A health benefit plan must include coverage for cognitive rehabilitation therapy, cognitive communication therapy, neurocognitive therapy and rehabilitation, neurobehavioral, neurophysiological, neuropsychological, and psychophysiological testing and treatment, neurofeedback therapy, and remediation required for and related to treatment of an acquired brain injury.

(b) A health benefit plan must include coverage for post-acute transition services, community reintegration services, including outpatient day treatment services, or other post-acute care treatment services necessary as a result of and related to an acquired brain injury.

(c) A health benefit plan may not include, in any annual or lifetime limitation on the number of days of acute care treatment covered under the plan, any post-acute care treatment covered under the plan.

(c-1) A health benefit plan may not limit the number of days of covered post-acute care, including any therapy or treatment or rehabilitation, testing, remediation, or other service described by Subsections (a) and (b), or the number of days of covered inpatient

care to the extent that the treatment or care is determined to be medically necessary as a result of and related to an acquired brain injury. The insured's or enrollee's treating physician shall determine whether treatment or care is medically necessary for purposes of this subsection in consultation with the treatment or care provider, the insured or enrollee, and, if appropriate, members of the insured's or enrollee's family. The determination is subject to review under Section 1352.006.

(d) Except as provided by Subsection (c) or (c-1), a health benefit plan must include the same amount limitations, deductibles, copayments, and coinsurance factors for coverage required under this chapter as applicable to other medical conditions for which coverage is provided under the health benefit plan.

(e) To ensure that appropriate post-acute care treatment is provided, a health benefit plan must include coverage for reasonable expenses related to periodic reevaluation of the care of an individual covered under the plan who:

- (1) has incurred an acquired brain injury;
- (2) has been unresponsive to treatment; and
- (3) becomes responsive to treatment at a later date.

Simply put, your insurance company is required to pay for brain injury rehabilitation without limitation or caps. It is imperative that you read and understand this law in the event your insurance provider is misleading. All brain injury providers in Texas are familiar with this legislation and will work with you to ensure every bit of medically necessary medical care is received. BIAA-TX staff are available to explain further at 1-800-444-6443.

AFFORDABLE CARE ACT

Toll-free phone: 1-800-318-2596

The Affordable Care Act (ACA) put in place comprehensive health insurance reforms that have improved access, affordability, and quality in health care for Americans. Texans may also search available ACA health insurance plan options online at www.healthcare.gov.

MEDICARE

Medicare is a health insurance program available through the Centers for Medicare & Medicaid Services (CMS). While most commonly used by people age 65 or older, younger people with disabilities resulting from brain injury may be eligible for Medicare. Medicare helps pay for health care costs but does not pay for all expenses or for long-term care.

SOCIAL SECURITY INCOME

Toll-free phone: 1-800-772-1213

Website: www.ssa.gov

The Social Security Administration manages two cash benefit programs for people with disabilities. Be aware that over 60% of first-time applications for these programs are denied, so be prepared to appeal the denial and consider engaging a disability attorney to advocate on your behalf. There are multiple steps in the appeal process, beginning with a request for reconsideration, moving onto a hearing before an administrative law judge (an ALJ), and ultimately, if needed, a hearing in Federal court. The success rates for people who have a hearing before an ALJ are nearly 60%, largely because applicants have representation from a disability attorney or a non-attorney disability advocate.

Social Security Disability Insurance (SSDI) provides disability insurance benefits for workers who have contributed to Social Security and become disabled or blind before reaching retirement age.

Supplemental Security Income (SSI) provides monthly cash income to low-income persons with limited work history and resources on the basis of age and disability. Apply online for benefits or contact the local office to apply in person.

SOCIAL SECURITY ADMINISTRATION OFFICES IN TEXAS

Search Social Security offices in Texas using the Social Security Office Locator at <https://secure.ssa.gov/ICON/main.jsp>.

AGING AND DISABILITY RESOURCE CENTERS

It can be confusing to find help for older adults and people with disabilities. Aging and disability resource centers provide information on and access to long-term services care programs with specialized information, referrals and other assistance. ADRCs help cut through the confusing maze of funding sources, multiple intake systems and eligibility processes. To contact your local ADRC, call 1-855-937-2372.

Area agencies on aging (AAA) are also available in Texas to provide services to help people age 60 and older, their family members and caregivers get information and assistance in locating and accessing community services. Services include benefits counseling, care coordination, legal assistance, caregiver support services, in-home support services, and more. You can contact your local AAA by phone at 1-800-252-9240.

WAIVER PROGRAMS

Waiver programs provide services Medicaid does not typically cover. These waivers provide long-term home and community-based services for people with disabilities or special health-care needs to help them live in the community. A person in a waiver program also receives full Medicaid health-care benefits.

The Texas Health & Human Services Commission offers detailed information on waiver programs online at <https://hhs.texas.gov/doing-business-hhs/provider-portals/long-term-care-providers/resources/compare-long-term-services-supports-ltss-programs>.

2-1-1 TEXAS

2-1-1 Texas provides information on services available in Texas, including long-term care services and supports. Call 2-1-1 or search for services online at www.211texas.org.



STATE OF TEXAS BRAIN INJURY PROGRAMS, AGENCIES, AND SERVICES

COMPREHENSIVE REHABILITATION SERVICES (CRS) PROGRAM

The Texas Comprehensive Rehabilitation Services, or CRS, program is for people who have sustained brain and/or spinal cord injuries. The goal is to ensure they can function independently in their home or community. CRS Counselors and family members work together alongside the individual with brain injury to identify rehabilitation goals and determine necessary services to support increased independence. Services may include:

- Inpatient comprehensive medical rehabilitation services (ICMRS)
- Outpatient rehabilitation services
- Post-acute rehabilitation services (PARS)

CRS is a state-funded program. If you are without insurance or having difficulty finding rehabilitation options, CRS is essential. To get started, call 877-787-8999, select a language, and then select Option 3. You may also call Texas 2-1-1 and select Option 1 to speak with a representative.

For detailed information on CRS, visit <https://hhs.texas.gov/services/disability/comprehensive-rehabilitation-services-crs>.

LONG TERM CARE SERVICES

People who need to have longer-term services or supports may be able to get them through programs for people who have a medical or physical disability. Most long-term care programs require that you have limited income and assets, that you show a need for services, and that you be a U.S. citizen or qualified legal alien who lives in Texas. Services may include:

- Personal care, such as housekeeping, meal preparation or personal tasks such as bathing and dressing
- Medical supplies or equipment
- Rides to medical appointments
- A break for caregivers (respite care)

To learn more, call 1-855-937-2372.

To search for or review state services that may be available to you, such as Medicaid or the SNAP food program, call 2-1-1 or visit www.yourtexasbenefits.com.

OFFICE OF ACQUIRED BRAIN INJURY

The Texas Health and Human Services (HHS) Office of Acquired Brain Injury (OABI) is the only state agency specifically focused on brain injury prevention, treatment, and education.

Website: <https://hhs.texas.gov/services/disability/office-acquired-brain-injury>

Email: OABI@hhsc.state.tx.us

Phone: 512-706-7191

TEXAS BRAIN INJURY ADVISORY COUNCIL

The Texas Brain Injury Advisory Council (TBIAC) is comprised of appointed citizens – including individuals with brain injury, family members or caregivers, and brain injury clinicians – tasked with advising Texas elected officials on strategic aims designed to prevent brain injuries and increase supports for people who have survived brain injuries. More information on the TBIAC is available at <https://hhs.texas.gov/about-hhs/leadership/advisory-committees/texas-brain-injury-advisory-council>.

WORKERS' COMPENSATION

Workers' compensation is a state-regulated insurance program that provides covered employees with income and medical benefits if they sustain a work-related injury or illness. Texas private employers can choose whether or not to provide workers' compensation insurance coverage for their employees. If offered, workers' compensation pays your medical bills and replaces a portion of your lost wages if you are injured at work or have a work-related illness.

To learn more about workers' compensation resources, visit <http://www.tdi.texas.gov/wc/employee> or call 1-800-252-7031.

CRIME VICTIMS' COMPENSATION

If your brain injury was the result of a crime you may be eligible for benefits. You can apply for compensation for expenses related to the crime, such as medical costs, counseling, home or car modifications, and more. If you are a victim of violent crime in Texas, report the crime to the local law enforcement agency and ask for information about the Crime Victims' Compensation program. Most police and sheriff's departments will have a crime victim liaison who can explain the program, provide you with an application and help you fill it out. You can get an application directly from Office of the Attorney General by calling 1-800-983-9933 or emailing crimevictims@texasattorneygeneral.gov. Learn more at <https://texasattorneygeneral.gov/cvs/crime-victims-compensation>.

EMPLOYMENT AND VOCATIONAL ASSISTANCE

Vocational Rehabilitation (VR) is a program that helps people who have physical, mental, or emotional disabilities to get and keep a job. Students with brain injuries who are receiving special education services are encouraged to register with the VR agency two years before high school graduation or before they turn age 21 to allow the VR counselor to participate in transition planning meetings.

The U.S. Department of Labor's Division of Employment and Training has One-Stop Career Centers in every state. Services of these centers are available for anyone who wants to work. The centers provide assistance in career exploration, training, and job searches.

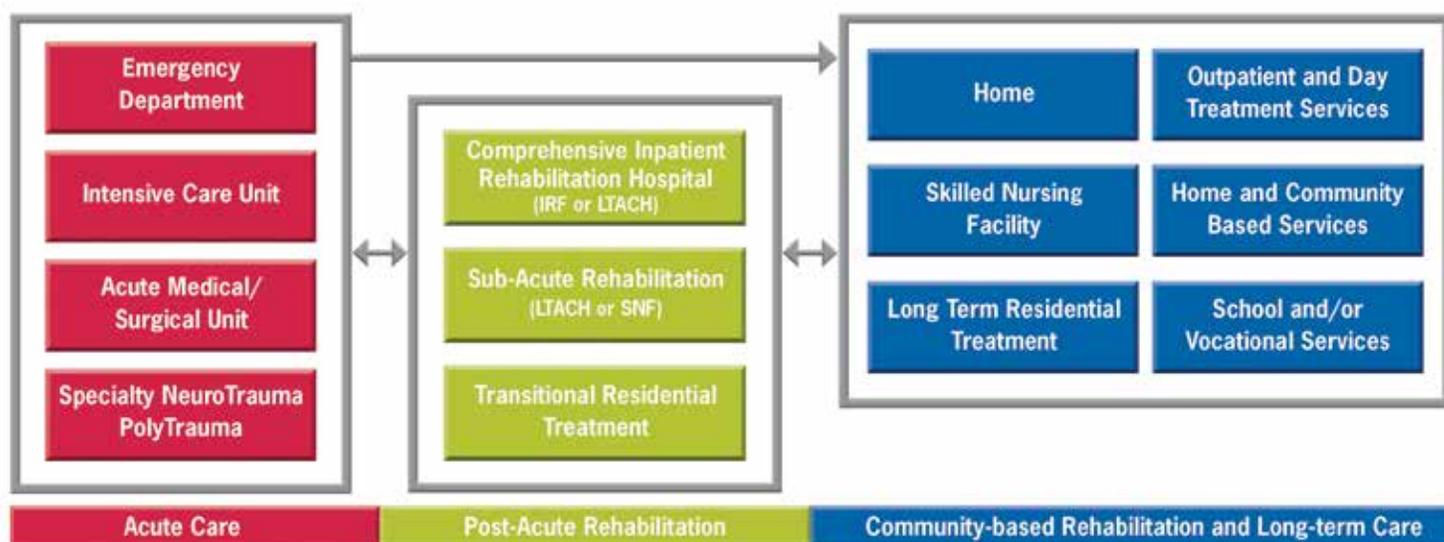
U. S. Department of Labor
Employment and Training Administration
Phone: 1-877-872-5627
TTY: 1-877-889-5627
Website: www.careeronestop.org

TICKET TO WORK PROGRAM

People over age 18 who receive Social Security assistance may be eligible for a program known as Ticket to Work. The goal of this program is to increase opportunities and choices for Social Security disability beneficiaries to obtain employment, vocational rehabilitation, and other support services. This program removes many of the barriers that made it difficult for people to go to work because their earned income would mean a loss of Medicaid benefits. The Social Security Administration automatically sends eligible students a "ticket" for this program. To learn more, visit <https://choosework.ssa.gov/about/how-it-works/index.html>



BRAIN INJURY PROGRAMS



Copyright © 2016 Brain Injury Association of America. Reprint with attribution.

The diagram above depicts brain injury treatment in an orderly progression from emergency or trauma care to community integration. Individuals who sustain brain injuries may enter, exit, and re-enter treatment at any point along the continuum. Treatment may be needed continuously or on an intermittent basis throughout the individual's life. Rehabilitation channels the body's natural healing abilities and the brain's relearning processes so an individual may recover as quickly and efficiently as possible, and involves learning new ways to compensate for abilities that have permanently changed due to brain injury. The focus of rehabilitation is to enable individuals to perform their activities of daily living (ADLs) safely and independently so they can move on to other forms of rehabilitation or transition to their home.

ACUTE REHABILITATION

As early as possible in the recovery process, individuals who sustain brain injuries will begin acute rehabilitation. The treatment is provided in a special unit of a trauma hospital, a rehabilitation hospital, or another inpatient setting. During acute rehabilitation, a team of health professionals with experience and training in brain injury work with the patient to regain as many activities of daily living as possible. Activities

of daily living include dressing, eating, using the bathroom, walking, and speaking.

POST-ACUTE REHABILITATION

When patients are well enough to participate in more intensive therapy, they may be transferred to a post-acute rehabilitation setting, such as a transitional rehabilitation facility. Transitional rehabilitation facilities are sometimes called residential rehabilitation or transitional living facilities. The goal of post-acute rehabilitation is to help the person become as independent as possible. Patients undergo at least six hours of therapy per day. This type of comprehensive rehabilitation in a post-acute facility is considered the gold standard for care and treatment following brain injury.

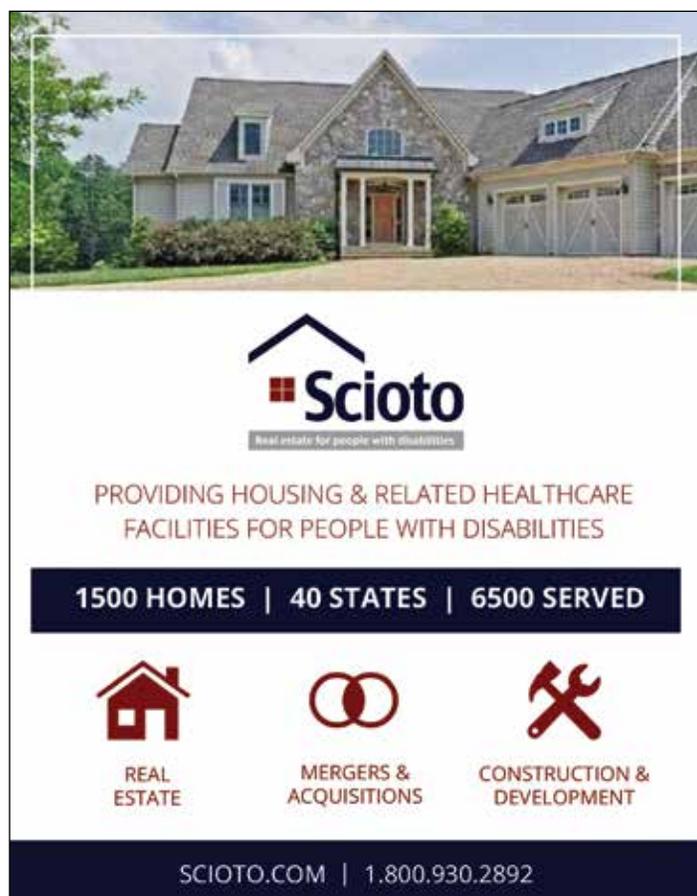
SUB-ACUTE REHABILITATION

Patients who cannot tolerate intensive therapies may be transferred to a sub-acute rehabilitation facility. Sub-acute rehabilitation programs are designed for persons with brain injury who need less-intensive rehabilitation services over a longer period of time. Sub-acute programs may also be designed for those who have made progress in an acute rehabilitation setting (and are still progressing) but are not making rapid functional gains. Sub-acute rehabilitation may

BIAA provides an interactive directory of Preferred Attorneys with experience handling brain injury cases. The directory is available on BIAA's website, and users may search for a local preferred attorney specializing in one of three practice areas: personal injury, civil rights, and financial issues. Visit www.biausa.org/preferredattorneys or call the BIAA-TX Brain Injury information Center toll-free at 1-800-444-6443 to find a lawyer who understands brain injury and is qualified to assist you and your loved one.

INDEPENDENT AND COMMUNITY LIVING

Centers for Independent Living (CILs) provide services to maximize the independence of individuals with disabilities and the accessibility of the communities in which they live. Core CIL services include: advocacy, independent living skills training, information, referrals, and peer counseling. Many CILs also help people find housing and personal care assistance. To find a local CIL near you in Texas, visit <https://hhs.texas.gov/services/disability/independent-living-services>.



Scioto
Real estate for people with disabilities

PROVIDING HOUSING & RELATED HEALTHCARE FACILITIES FOR PEOPLE WITH DISABILITIES

1500 HOMES | 40 STATES | 6500 SERVED

REAL ESTATE MERGERS & ACQUISITIONS CONSTRUCTION & DEVELOPMENT

SCIOTO.COM | 1.800.930.2892

MEDICAL EQUIPMENT AND SUPPLIES

Your medical provider will likely recommend local suppliers for medical equipment necessary to care for the individual with brain injury. If you are having trouble locating or paying for necessary supplies, contact the Brain Injury Information Center at 1-800-444-6443 or visit the resources listed below:

- **Texas Technology Access Program – University of Texas** has short- and long-term assistive technology lending programs. Visit <https://tatp.edb.utexas.edu> or call 1-800-828-7839.
- **UsedHME** is a free listing service where people can buy, sell, or find donated used home medical equipment. Visit www.usedhme.com to learn more.
- **Rehabilitation Services Volunteer Project (Regional Resource – Houston)** provides physical rehabilitation services and equipment to uninsured people with disabilities. The medical equipment division provides durable medical equipment such as wheelchairs, bathroom equipment and walkers to people with disabilities, regardless of diagnosis, who lack access to this equipment. Learn more at <http://rsvptexas.org> or by calling 855-825-7787.
- **DME Exchange of Dallas (Regional Resource)** collects, refurbishes and sanitizes donated equipment and distributes the equipment to people whose income and insurance will not cover doctor-ordered equipment. Learn more at <http://dfwdmeexchange.org> or call 214-997-3639.
- **Project MEND (Regional Resource – San Antonio)** offers medical equipment and assistive technology to people who cannot afford the items they need or have gaps in insurance coverage. The program repairs, refurbishes and sanitizes donations of gently used medical equipment. They serve children, aging adults, veterans, their spouses and children and persons who are homeless. Learn more at <http://projectmend.org> or call 210-223-6363.
- **GoodwheelChairs.org (Regional Resource – Austin)** provides low cost, gently used wheelchairs, power chairs and scooters. Learn more at <http://goodwheelchairs.org/index.html> or call 512-420-8005.

- **Texas Ramps** builds wheelchair ramps for disabled or elderly persons who cannot afford to buy one. To learn more or to request a ramp, visit texasramps.org, or email info@texasramps.org or call 214-675-1230.

ASSISTIVE TECHNOLOGY AND ADAPTIVE EQUIPMENT

Assistive technology (AT) and adaptive equipment includes items, equipment, apps and software programs, or other products designed to increase, maintain, or improve the functional capabilities of persons with disabilities. Examples include communication boards, power lifts, wheelchairs, adapted vehicles, eye-gaze trackers, environmental controls, and alarm systems. In addition to improving safety, communications and environmental control, these devices promote greater independence by helping people accomplish tasks that were previously impossible or very difficult to perform. The service providers listed below may provide or assist with the identification, modification, funding and/or acquisition of the AT that can make everyday life easier after a brain injury. Many offer loaner devices, device demonstrations, and device reuse.



CRISIS SUPPORT AND SERVICES

SUICIDE PREVENTION LIFELINE 1-800-273-8255

Suicide Prevention Lifeline Online Chat:
www.suicidepreventionlifeline.org

HOSPITALS IN TEXAS

Texas has 407 hospitals, the highest number in the nation, and roughly 60% of Texas hospitals are designated trauma centers. A trauma center is a hospital equipped and staffed to provide care for patients suffering from major traumatic injuries – like brain injury – caused by events such as falls, motor vehicle collisions, or gunshot wounds. Trauma centers are divided into four categories, or levels, as detailed below. It is important to remember an Emergency Department (E.R.) is not necessarily a trauma center. For a detailed list of available trauma centers in Texas and their respective designations, visit <https://dshs.texas.gov/emstraumasystems/etrahosp.shtm>.

LEVEL I – COMPREHENSIVE TRAUMA CENTER

A Level I Trauma Center is a comprehensive regional resource that is capable of providing total care for every aspect of injury – from prevention through rehabilitation. Elements of Level I Trauma Centers include:

- 24-hour in-house coverage by general surgeons, and prompt availability of care in specialties such as orthopedic surgery, neurosurgery, anesthesiology, emergency medicine, radiology, internal medicine, plastic surgery, oral and maxillofacial, pediatric and critical care.
- Referral resource for communities in nearby regions.
- Provides leadership in prevention, public education to surrounding communities.
- Provides continuing education of the trauma team members.
- Incorporates a comprehensive quality assessment program.
- Operates an organized teaching and research effort to help direct innovations in trauma care.
- Program for substance abuse screening and patient intervention.
- Meets minimum requirement for annual volume of severely injured patients.



Have you or your loved one had a brain injury?

Call our toll-free number to speak with a brain injury specialist.

Monday through Friday
9 a.m. to 5 p.m.

1-800-444-6443



Receive individualized, confidential resources and support.

We understand.

We know what can happen when someone experiences a blow or jolt to the head. Perhaps the injury was caused by a fall, motor vehicle crash, sports mishap, violent behavior, or was the result of stroke, near drowning, or infection. No matter the scenario, a brain injury is not simply an event or an outcome - it is often a misunderstood diagnosis. A person with a brain injury may have physical problems or trouble remembering things. Sometimes, there is a change in the person's behavior and it may be hard for him or her to think clearly.

We can listen.

You need accurate and reliable information regarding brain injury. You are not alone.

We can help.

The National Brain Injury Information Center is a toll-free telephoneservice for getting information, resources, and services in your community. We provide information about:

- Local treatment and rehabilitation options
- Funding for services
- Legal issues
- Resources for veterans
- Living with brain injury
- Returning to school and work
- Coping with changes
- Planning for your future
- Counseling services
- Respite care



For general information about brain injury, visit www.biausa.org.

LEVEL II – MAJOR TRAUMA CENTER

A Level II Trauma Center is able to initiate definitive care for all injured patients. Elements of Level II Trauma Centers include:

- 24-hour immediate coverage by general surgeons, as well as coverage by the specialties of orthopedic surgery, neurosurgery, anesthesiology, emergency medicine, radiology and critical care.
- Tertiary care needs such as cardiac surgery, hemodialysis and microvascular surgery may be referred to a Level I Trauma Center.
- Provides trauma prevention and continuing education programs for staff.
- Incorporates a comprehensive quality assessment program.

LEVEL III – ADVANCED TRAUMA CENTER

A Level III Trauma Center has demonstrated an ability to provide prompt assessment, resuscitation, surgery, intensive care and stabilization of injured patients and emergency operations. Elements of Level III Trauma Centers include:

- 24-hour immediate coverage by emergency medicine physicians and the prompt availability of general surgeons and anesthesiologists.
- Incorporates a comprehensive quality assessment program.
- Has developed transfer agreements for patients requiring more comprehensive care at a Level I or Level II Trauma Center.
- Provides back-up care for rural and community hospitals.
- Offers continued education of the nursing and allied health personnel or the trauma team.
- Involved with prevention efforts and must have an active outreach program for its referring communities.

LEVEL IV – BASIC TRAUMA CENTER

A Level IV Trauma Center has demonstrated an ability to provide advanced trauma life support (ATLS) prior to transfer of patients to a higher level trauma center.

It provides evaluation, stabilization, and diagnostic capabilities for injured patients. Elements of Level IV Trauma Centers include:

- Basic emergency department facilities to implement ATLS protocols and 24-hour laboratory coverage. Available trauma nurse(s) and physicians available upon patient arrival.
- May provide surgery and critical-care services if available.
- Has developed transfer agreements for patients requiring more comprehensive care at a Level I or Level II Trauma Center.
- Incorporates a comprehensive quality assessment program.
- Involved with prevention efforts and must have an active outreach program for its referring communities.

HIGHLANDS REHABILITATION HOSPITAL
Getting You Back to Better

Brain Injury Rehabilitation Program

Our goal is to enable each person to attain their highest level of independence in mobility, self-care, communication, cognition and psychosocial adjustment following brain injury. Comprehensive, interdisciplinary patient assessments and treatments are designed to meet the unique needs of each person served.

1395 George Dieter Drive
El Paso, TX 79936
P: 915.298.7222
www.vrhhighlands.com

HOUSING

- **Texas Department of Housing & Community Affairs**
Website: www.tdhca.state.tx.us/texans.htm
- **Local – Texas Public Housing Agencies**
Website: www.hud.gov/program_offices/public_indian_housing/pha/contacts/tx
- **North Texas – Community for Permanent Supported Housing**
Website: www.txcpsh.org
- **Central Texas – Mary Lee Foundation**
Website: www.MaryLee.org

TRANSPORTATION

Transportation is essential to one's ability to live and thrive in their community after sustaining a brain injury. Whether this means driving oneself or utilizing public transportation, a variety of options exist to achieve success.

- **Public Transportation Paratransit Services for Persons with Disabilities** helps people travel in the community. Contact the local transit authority and ask for the paratransit coordinator. You can find a full list of public transportation agencies in Texas at <http://www.apta.com/resources/links/unitedstates/Pages/TexasTransitLinks.aspx>.
- **Medicaid Medical Transportation Program** helps people with Medicaid benefits get to the doctor's office, dentist, hospital, drug store or any other location where they receive Medicaid services. To use this service, you must not have access to any other means of transportation. To schedule a ride, call:
 - Houston/Beaumont area: 1-855-687-4786
 - Dallas area: 1-855-687-3255
 - Everywhere else: 1-877-633-8747 (1-877-MED-TRIP)



Mary Lee Foundation Rehabilitation Center

- **Comprehensive Services for Post Acute Brain Injury and other Neurological Conditions**
- **Inpatient and Outpatient Care**
- **Extended Care Programs**

For more information call 512-443-5777

braininjury@maryleefoundation.org

www.maryleefoundation.org

1339 Lamar Square Drive
Austin, TX 78704



Before you call for a ride, you must have already made a doctor's appointment. To obtain a ride, call at least two work days in advance. If you travel a long distance to your appointment, be sure to call at least five work days in advance. When you call, have the following information ready to share:

- Medicaid ID or social security number
- Address where you will need to be picked up
- Name, address and phone number of the provider
- The date and time of your doctor's visit
To learn more about getting a ride, visit <https://hhs.texas.gov/services/questions-about-yourbenefits/getting-a-ride-frequently-asked-questions>.
- **Adaptive Driving** are often a part of brain injury rehabilitation (inpatient or outpatient). Cognitive rehabilitation providers often offer adaptive driving as part of their rehabilitation plan and have Certified Driver Rehabilitation Specialists on staff.

VETERANS SERVICES

U.S. Department of Veterans Affairs

The U.S. Department of Veterans Affairs offers confidential help and support for veterans and their family members. For more information, or to speak with someone now, call the Veterans Crisis Line at 1-800-273-8255.

Texas Veterans Commission

The Texas Veterans Commission provides disabled U.S. veterans residing in Texas with a variety of support services, including disability grants if you lost mobility during service or VA-provided medical attention. Learn more at tvc.state.tx.us or by calling 512-463-5538 or 1-800-252-8387.

TexVet

TexVet is a website created via partnership between the Texas A&M University Health Science Center and Texas Health & Human Services Commission to deliver information on available resources and support for veterans in one, easy-to-find place. Visit www.TexVet.org for resources in your area.



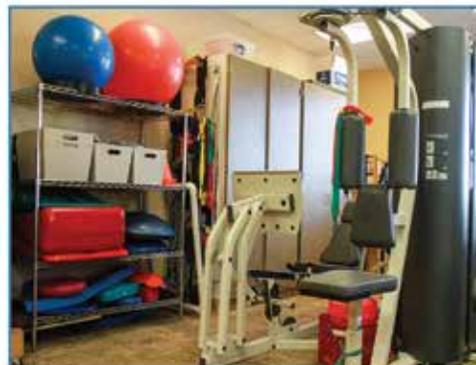
RESHAPING THE FOCUS.

From ICU environments to community-based rehabilitation facilities, Nexus Health Systems' Texas-based neurocontinuum of care provides a variety of services and care settings to help acquired brain injury patients function at the highest possible level and lead productive and meaningful lives – because we're focused on **mending minds.**

NEXUS
HEALTH SYSTEMS
MENDING MINDS.

nexuscontinuum.com | 855.729.0855

**Leaders in Brain Injury Treatment,
Rehabilitation and Recovery
for over 30 years.**



Texas NeuroRehab Center 1106 W. Dittmar Rd. Austin, TX 78745 1-800-252-5151 texasneurorehab.com

APPENDIX A

GUIDING PRINCIPLES WHEN SELECTING A BRAIN INJURY REHABILITATION PROGRAM

Careful selection of services to meet the needs of an individual with brain injury and their family is a critical step toward achieving maximum recovery. An equally vital step is active participation in the decision-making about the services provided and monitoring service delivery whether in the hospital, rehabilitation facility, community residence or other settings. Below are some important tips to keep in mind while selecting a brain injury rehabilitation facility.

BE CURIOUS AND ASK QUESTIONS

While you know your loved one best, you are likely not familiar with the wide range of programs, services, resources, and information in the brain injury rehabilitation field. Learn as much as you can about any program that might be appropriate for your loved one by asking questions about its staff, service philosophy, history, and method of collecting outcome data. If you do not understand something, ask someone at the program to explain it in the detail you need. Like medicine, brain injury services are often as much an “art” as a “science” and can vary widely from program to program.

LEARN FROM OTHERS

When researching multiple programs and services, try to talk with individuals who have participated in each one. Support groups are often a good way to find people who have had experience with a program you are considering. Ask the facility or organization to provide references of individuals who have used their services. Sometimes, due to privacy concerns for those receiving services, you may not always be able to get references.

In many states, consumers can access information about the quality and performance of programs and facilities that are licensed or accredited. Ask prospective facilities how to obtain outcome data and quality information about their program in Texas. You should also check out the program or service provider online, keeping in mind that those who have had negative experiences are most likely to complain, and their experiences may not be fully representative of the quality of a given provider.

EXPLORE MORE THAN ONE PROGRAM

Whenever possible, thoroughly consider several options. The closest program or the one that offers the most services may not necessarily be the best for your loved one’s individual needs. Be wary of anyone who tries to pressure you, while paying attention to any time constraints that may result from limited availability or time-limited access to benefits. Remember that the quality of services cannot be judged solely by how nice the facilities or marketing materials appear.

GET IT IN WRITING

Keep a log of who you spoke to, the date, and a summary of your conversation. Keep copies of all correspondence. There will be a lot of information, including new and technical terms to process, so it is easy to forget details. You may wish to record your conversations so you can refer to them later. Be sure to ask permission in advance; most professionals will readily agree to be recorded. Get any commitments in writing of the types, quantities, and costs of services to be provided before you finalize your decision.



KNOW YOUR FINANCIAL SITUATION

Find out about public or private benefits your loved one may be eligible for and apply promptly. Depending on what kind of services are needed, talk with your insurance carrier, managed care organization, or other health care payer to find out how much it will pay, for what services, for how long, and under what conditions. Ask about deductibles and co-payments. Get a copy of your insurance policy or health plan and re-read it. Find out the extent of your financial obligations. Ask about the long-term implications of decisions you make today. Before services begin, be prepared to fight denials by your insurance company. "No" does not always mean "no." BIAA has published a free guide called "Navigating the Insurance Maze" that can be downloaded at <https://www.biausa.org/insurance>. Be prepared for ongoing negotiations with insurance representatives and contact the BIAA affiliate in your state to be referred to advocates who can help.

Get a written disclosure statement from the provider before services begin. The statement should document what services will be rendered and exactly who will be responsible for payment, co-pays, and deductibles. Get regular updates about where you stand financially with the payer and the service provider(s).

BE INVOLVED, STAY INVOLVED

The ultimate goal is to help your loved one succeed. Brain injury programs and services should promote self-determination and community integration to the fullest extent possible. Self-determination can be achieved by deciding how you wish to use your and your loved one's time, energy and resources. Voice your opinions, questions, and concerns promptly and respectfully.

Choosing brain injury programs and services may be the single most important decision you make emotionally, financially, and for your loved one's outcome. Take the time to make good decisions. Once services begin, stay on top of what is being provided and what other options exist. Be an informed consumer.

APPENDIX B

QUESTIONS TO MAKE INFORMED DECISIONS AND MONITOR BRAIN INJURY SERVICES

The questions below may not apply to all programs or services providers in all settings. BIAA encourages you to select those questions that make sense for your particular situation. There may be other questions you feel are important as well, so add them. Write down the responses you get. Ask the same questions of each program or service provider you are considering, and then compare the responses. If you need more information, or something is not clear, do not hesitate to ask.

Please do not be concerned about the amount of time it may take you to ask the questions you have selected. Selecting a program or service that meets your needs is important. Monitoring services once they have begun is also important. Refer to this guide from time to time and reflect on how well the program staff or service provider is doing what they said they would. Ask questions you did not consider during the selection process but which become important as things progress. Remember, information is power.

QUESTIONS FOR THOSE IN NEED OF IN-PATIENT MEDICAL AND REHABILITATION PROGRAMS

Discharge Planning

Planning for discharge must begin at admission. It is imperative to have an understanding of what the next step is after discharge, as well as what kinds of services might be needed and their availability. Be clear about your intent to be involved in discharge decisions. As with other information, it is important to get discharge planning commitments in writing. It is virtually impossible for anyone to tell you the particular level of recovery that will be achieved. They can, however, commit to what they will do to achieve maximum recovery.

- What are all the possible options after discharge?
- What is the role of the person with brain injury and their family in decisions about discharge?
- Where do you think the person will go after discharge?
- How and who decides when the individual is ready for discharge? What would make the program extend or shorten the anticipated discharge date? If this is done, how much notice is given, and what is the role of the individual and their family in this decision?
- What if a person decides to leave the program with or without advance notice?
- How does the program help research discharge options? Who does this?
- What kinds of follow-up after discharge are provided to the person with brain injury? What kinds of follow-up are offered to the family? Why is follow-up offered? How long is follow-up offered? What are the charges for this service and who generally pays?
- What is the average length of stay? What is the length of stay you expect for me/my loved one? How is that determined?
- How do I get a complete set of records for my files upon discharge? Is there a charge for this? How much does this cost and who pays?
- Where are people with brain injury the program served in the past?
- What happens if the place the person is expected to go after discharge falls through?
- What happens if it appears the person has no discharge options except with family, and the family is unable to provide the care or supervision needed, or for any other reason they feel they are not a viable discharge option?

- What does the program do to locate affordable community housing with a package of supports provided by a variety of state and community agencies to afford the individual the opportunity to live independently (i.e., transportation, recreation, vocational, educational and/or personal assistance)? How does the program assist in identifying and coordinating with community service providers?

QUESTIONS APPLICABLE TO ANY PROGRAM/ SERVICE/SERVICE PROVIDER

Financial Responsibilities/Arrangements

People with brain injuries often have to leave programs or service providers before they are ready because they have exhausted their funding. Large unexpected bills for brain injury services are a surprise and often change financial stability and status. The best way to prevent these occurrences during the rehabilitation process is to stay informed with the program or service provider and with any funding source(s) you have available.

- What is the daily cost of the program?
- What does this include (e.g., room and board, meals, medications, physician services, therapy, transportation)
- What services are billed as extra (e.g., telephone, laundry)?
- How are charges calculated (e.g., per diem, per unit)?
- What sources of funding does the program accept?
- What agreement does the program have with my funding source?
- What do I need to do to get copies of all correspondence (including bills submitted and payments rendered) between the program and my funding source?

- Who is billed for services my funding source will not pay for? What happens if the second source does not pay?
- Am I (or is my insurance) billed for services which are planned or scheduled but not provided (e.g., if a therapy session or appointment is missed)?
- How do home visits or other leaves of absence affect payment? Is there a bed hold charge? If so, who is expected to pay if insurance will not?
- What assistance does the program offer to determine which other public or private insurance and financial benefits the individual may be eligible for? How will they help you apply and follow the application process for these?

Admissions Planning

- What are the rights and responsibilities of people participating in this program? How does the program or service provider inform the individual of these? May I have a copy?
- How do you make decisions about who to admit into the program or service? What are the eligibility criteria?
- How will you get previous medical and other important (i.e., school) records and other information you may need in order to make this decision?
- I would like a proposed service or treatment plan before I decide. How can I get this?
- How do you involve the program or service I am in now in the admission and transition process? Be specific.
- If I choose this program or service, what do you need to do prior to admission? How long will that take? What do you need me to do?
- How can I arrange to spend some time observing the program? Note that depending upon the nature of the facility, program or service, this may not be possible given the patient confidentiality provisions of HIPAA, the Health Insurance Portability and Accountability Act of 1996.

- What is your understanding of the role my funding source has in the decision-making process about the program or service I select?
- What forms or contracts will I be expected to sign prior to admission or starting the service?
- How can I get a copy of each to read thoroughly before I sign?

Involvement of Family and Friends

The active involvement of family members and friends is often a key component to achieving maximum success in brain injury rehabilitation. The level or degree of involvement, however, often varies depending upon the individual with brain injury's status and wishes, as well as the type and location of services received.

- Assuming you have appropriate HIPAA releases where needed, how does your program or service involve family members and friends?

LEARN HOW TO IMPROVE YOUR HEALTH WITH ALTERNATIVE TREATMENTS

In *Rethink, Redo, Rewired*, Anthony, a Motorcycle Trauma Survivor, shares how he used Natural, Alternative Treatments like Kangen Water and Laser Therapy to heal his brain and body in ways that pharmaceuticals couldn't.

- ✓ Traumatic Brain Injury
- ✓ Sleep Disorders
- ✓ Anxiety & Depression
- ✓ Headaches
- ✓ Chronic Pain
- ✓ Gastro Problems

Order the book today at: <http://rethinkredorewired.com>

- How are family members and friends involved in progress meetings? How will we be informed enough in advance so we can plan to participate? Will there be a specific contact person for regular communication with me?
- What do I need to do to get copies of written reports regularly? Who is responsible for sending me these?
- How will you schedule regular conference calls for me to speak with the direct service providers if I cannot personally attend an in-person meeting?
- If I have a question about a particular area (e.g., physical therapy), what do I need to do to speak with that therapist directly?
- What kind of family training, support groups and/or therapy is offered? Is there a charge for participation?
- Since I live far away, what overnight arrangements are made for me to visit for a few days? How about for the person's friends?
- What arrangements are made for staff to explain services and reports to me in non-technical terms?
- What is your policy about visitors?
- What are your policies which would affect friendships the person being served makes with other people served by your program? What provisions are made for them to spend time together as they might choose?

Legal Considerations

- How does a legal settlement affect the program's expectations about payment?
- Has the program ever recommended guardianship, conservatorship or representative payees for people being served? Has the program ever recommended that these are no longer needed? If yes, what assistance is provided to the individual, family

members or friends who choose to pursue the recommendation?

- Is the program licensed, accredited or otherwise certified? By whom? How can I contact them to learn more about what they require for licensing? Can I see the license?
- When was the last state or local inspection and what were the results?
- Is the program CARF brain injury accredited? Any other CARF accreditation? When was the last survey?
- Is the program accredited by the Joint Commission? At what level (1 year, 3 year, type 1)? When was the last survey?
- What recourse does the person being served have if they question or disagree with the quality or necessity of services being provided?
- What recourse do family members and friends have if they question, or disagree with the quality or necessity of services received?
- What provisions are made for personal banking services? Where do you keep money that belongs to people being served in your program? How do you account for money which is put into your program's care and who is responsible for this accounting?

PROGRAM

Every component of every program or type of brain injury service is not addressed here. For example, specific questions about physical therapy or neuro-optometric services are not included. The components below are those which tend to have broad implications, that is, to touch more than one specific discipline, often simultaneously. You will also wish to ask questions about the philosophy and methodology used in specific disciplines that are central to the services needed in your individual situation.

Observations about Aesthetics

- Are the facilities clean?
- Are people being served clean and dressed in a manner you are comfortable with? Do they appear to be well cared for?
- Does the staff seem attentive, to know people being served by name and to care genuinely about people in the program?
- When food is part of the program/service is the food appealing? How does the program accommodate special diets, personal preferences and requests for a different meal schedule? Is there any charge for this?
- Do people being served seem comfortable with the way they are being treated?

Experience with People with Brain Injury

- How many people with brain injuries has the program worked with in the past year? How many total individuals have they served?
- What is the average staff turnover rate? Do they recruit people who have experience in serving people with brain injury? What staff training is provided? How many ACBIS Certified Brain Injury Specialists (CBIS) are on staff? Have direct care staff received BIAA Brain Injury Fundamentals training?
- How long has the program been in existence? When did it begin to serve people with brain injury? Why was it established?
- Who is responsible for the overall supervision of the services rendered to people served? How often are they at the program? How much direct contact do they have with individual people served?
- What types of people will be working directly as part of the team?

- How does the program integrate the individuals expressed desires and goals in service planning? For example, if an individual dislikes cooking and will not be expected to cook at home, is cooking an expected program component? If it will take a person three hours to feed themselves, and they decide this wastes energy they would prefer to use in another manner, how will the program support them in this decision, and what assistance will be provided to find ways to have feeding done by someone else – both at the program and at home?
- Is there a consistent schedule for an individual's day? What involvement does the person have in directing the schedule and selecting the program components?
- What do people generally do during unscheduled times?
- What is the evening schedule?
- What is the weekend schedule?
- How is the need for specialized adaptive equipment identified? How is the equipment provided and paid for?
- What access do people being served and their families have to their records? If I wanted to see my record now, what would I have to do? What recourse do I have if I disagree with something in the record?

Medical Services/Medications

- Who is responsible for providing medical services? What is their background? Is the same person available at different times, or are multiple medical practitioners used?
- How is my personal physician included in providing medical services while I am in the program?
- How does the program handle medical emergencies?

- How are routine medical issues (i.e., regular dental and ophthalmology services) provided?
- How would the program manage the special medical needs which have resulted from the injury?
- I have heard that people can have trouble with bedsores. How does this program avoid or prevent this?
- What is the policy for the use of psychotropic or other mood-altering medications? What role does the individual have in these decisions? What does the program do if they decline, against medical advice? Does the program utilize the services of a neuropsychiatrist?
- Who monitors medications and medication interactions? How often is this reviewed? What steps are taken to assure that therapeutic levels of medications are maintained and not exceeded?
- What steps does the program take to assure that behavioral interventions are clearly understood by all staff the person has contact with and that the plan is being implemented consistently by all staff (even at 3:00 in the morning)?
- How is the effectiveness of behavioral interventions measured?
- What role does medication play in "behavior management?"
- Are physical restraints used? If so, under what circumstances? What policies or protocols exist for the use of physical restraints? May I see a copy of these?
- Is a "secure" or locked unit available? When does the program recommend the use of these? Who decides when a person is ready for an open unit after being on a secure unit? How?
- At what point is an individual's behavior deemed unacceptable to the program? How much notice does the program give the individual and their family? What efforts are made by the program to assist in locating a comparable program that can better meet the needs of the person?

PROGRAM COMPONENTS

Cognitive Services

- What approaches does the program use to address cognitive strengths and limitations?
- Is neuropsychological testing done? How much emphasis is placed in test reports on recommendations to build on an individual's cognitive strengths? How much emphasis is placed on reporting test scores and the person's limitations? When is retesting conducted?
- If a "cognitive therapist" or "cognitive remediation specialist" is a member of the team, what particular qualifications do they have? How is the effectiveness of cognitive services measured?
- Behavioral interventions:
- What approaches does the program use to address behavioral concerns? What role do the individual and their family play in determining the types of behavioral interventions used?

Vocational Services

- What is the extent of vocational services provided by the program?
- How are situational vocational evaluations conducted? How are job trials, training or placement provided? How are job coaches used? For how long?
- What interface is there between the program and state vocational rehabilitation services?

Educational Services

- What educational services are offered? To children? To college students? To adults?

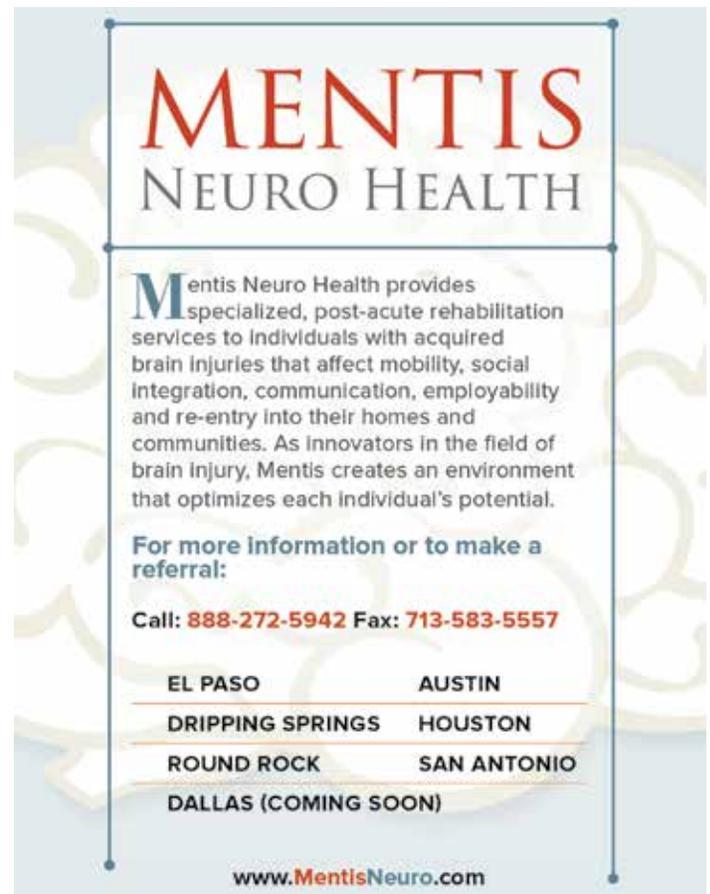
- Does the program have a teacher on staff with expertise in educating children and adolescents with brain injury?
- What is the interface between the program and the person's school?

Community Re-entry

- What components of the program take place in the community? How frequently is the individual in the community?
- How are the person's ability to get around and to use community services and resources evaluated and addressed?
- What local resources are used by the program to address the needs of the individual?
- How does the program accommodate an individual's request to participate in community activities (i.e., AA or league bowling)?
- What outreach does the program do to help educate the community about brain injury and its consequences?
- What does the program do to learn about the individual's home community and to identify resources and contacts there? What linkages are made with these resources and contacts prior to discharge? Are any of these contacts part of any discharge planning? Is there any follow-up once discharge has occurred?
- What efforts are made to work with the person in their home, even if the program is "facility-based?" How often can this be expected – once for evaluation only or multiple times to prepare the person for the return home?
- What is the connection between the program and the local Independent Living Center?

Recreation

- How does the program accommodate the individual's continued involvement in recreational interests and activities? Are modifications of activities or equipment suggested, and opportunity for situational exploration of the effectiveness of modifications included?
- What does the program do to support the individual's desires to become active in new recreational pursuits?
- How does the program help the individual identify ways to participate in recreation and social opportunities in their community?
- What connection does the program have with: the local recreation department, community therapeutic recreation services, social support and activity groups or other community resources?



MENTIS
NEURO HEALTH

Mentis Neuro Health provides specialized, post-acute rehabilitation services to individuals with acquired brain injuries that affect mobility, social integration, communication, employability and re-entry into their homes and communities. As innovators in the field of brain injury, Mentis creates an environment that optimizes each individual's potential.

For more information or to make a referral:

Call: 888-272-5942 Fax: 713-583-5557

EL PASO	AUSTIN
DRIPPING SPRINGS	HOUSTON
ROUND ROCK	SAN ANTONIO
DALLAS (COMING SOON)	

www.MentisNeuro.com

APPENDIX C

GUIDE TO SELECTING LEGAL REPRESENTATION

In the aftermath of a brain injury, the injured person and his or her family often need to seek the advice of an attorney. Medical treatment, such as brain injury rehabilitation, and long-term care services are expensive and may span many years. Individuals and families must address and make decisions on financial issues, estate planning, returning to work or school, establishing guardianship or a power of attorney, and other issues.

BIAA provides an interactive directory of Preferred Attorneys with experience handling brain injury cases. The directory is available on BIAA's website, and users may search for a local preferred attorney specializing in one of three practice areas: personal injury, civil rights, and financial issues.

To locate a BIAA Preferred Attorney near your home, visit www.biausa.org/PreferredAttorneys.

PERSONAL INJURY PREFERRED ATTORNEYS

People who sustain brain injuries from vehicle crashes, medical malpractice, falls, defective products, or other incidents caused by another party's carelessness often find it helpful to talk to an attorney. Pursuing the corporation or individual that caused a brain injury is a way to ensure justice and accountability. A lawsuit can also provide financial resources to aid with rehabilitation and long-term care if the injury causes a permanent disability. Sometimes a lawsuit will encourage the responsible party to take steps to prevent injuries to others in the future. The plaintiff is the person suing, typically the injured person or the family (or estate) of the injured person. The defendant is the party or parties that caused the brain injury. One of the most important reasons to get legal help is the difficulty of determining who is legally responsible for the injury. In a motor vehicle crash, the driver of an automobile, his employer, the automobile



GET JUSTICE.

BIAA PREFERRED ATTORNEYS UNDERSTAND BRAIN INJURY

LEARN MORE AT WWW.BIAUSA.ORG/ATTORNEYS

manufacturer, the local government or its employees, or the bartender at a local bar could all be liable. A Personal Injury Preferred Attorney will investigate the case, determine what kind of case to bring against which defendant, and begin preparing the case while the injured person and his or her family focus on rehabilitation and recovery.

Choosing a personal injury attorney can have significant long-term implications. The attorney will seek to obtain full compensation for medical bills, lost income, and future care costs. The attorney may also seek damages for pain and suffering. Choosing an attorney requires consideration of many factors, including education and training, knowledge of the consequences and treatment of brain injury, knowledge of how to structure and manage awards, and experience with similar cases. An attorney must have the financial resources to try the case as well as access to the best experts.

When interviewing a prospective attorney, here are some important questions to ask:

- How much of your practice is devoted to personal injury?
- Of your personal injury cases, how many are devoted to brain injury?
- How did you first become involved in brain injury cases?
- Based on your information, what are the strengths and weaknesses of my case?
- What additional information about my case do you need?
- Are you prepared to invest the money it may take to investigate, participate in discovery, prepare, and present my case?
- Have you had success in past brain injury cases and, if so, can you share examples?

Most personal injury attorneys work under a contingent fee arrangement. This means the attorney agrees to accept a fixed percentage of the recovery. The recovery is the amount paid to the client (in this case, the plaintiff) at end of the case. Attorneys invest substantial time and money during the investigation, preparation, and resolution of a case. Because of the financial risk involved, attorneys may decline cases if

they do not believe there is a reasonable likelihood of success.

CIVIL RIGHTS PREFERRED ATTORNEYS

The United States Constitution, federal laws, and federal court decisions protect the civil and human rights of individuals who are disabled. These protections include access to housing, transportation, employment, education, businesses, and government services. For more information, review the following:

- Rehabilitation Act of 1973
- Individuals with Disabilities Act (IDEA)
- Olmstead Decision
- Fair Housing Act
- Americans with Disabilities Act (ADA)
- National Voter Registration Act of 1993

BIAA's Civil Rights Preferred Attorneys will examine your case and advise you on next steps.

FINANCIAL ISSUES PREFERRED ATTORNEYS

Brain injury may leave a variety of financial issues in its wake. A person with a brain injury may be unable to return to work, may need assistance applying for state and federal benefits, or may need help managing his or her money. In cases of long-term disability, family members may require assistance with financial and estate planning to be sure their loved one is taken care of in the future.

A BIAA Financial Issues Preferred Attorney will assist the individual and his or her family with the financial ramifications caused by brain injury, including:

- Applying for government benefits, such as Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI)
- Guardianship
- Estate planning, including establishing a Special Needs Trust, living will or advanced directive, and/or power of attorney

Read "Applying for Disability Benefits after Brain Injury" in Appendix D for more information on Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI).

APPENDIX D

APPLYING FOR DISABILITY BENEFITS AFTER BRAIN INJURY

Many Americans suffering from brain injury-related disabilities are unable to work and seek Social Security Disability benefits to alleviate their financial burden. Unfortunately, the application process is time consuming. At the time of initial application, the Social Security Administration only approves about 30 percent of more than two million applications each year, leaving the remaining 70 percent to navigate a stressful appeals process. There are five stages of the application and appeal process, specifically:

1. Initial Application

It often takes 90 to 120 days to complete the initial application process and, as stated above, the SSA only approves approximately 30 percent of applications at this stage.

2. Reconsideration

If the SSA denies the initial application, applicants have 60 days to file an appeal. It often takes 3 to 5 months to complete, and the SSA typically approves less than 15 percent at this stage.

3. Hearing/Administrative Law Judge

If the SSA denies the reconsideration appeal applicants have 60 days to request a hearing before an administrative law judge. Although the majority of cases are approved at this stage (more than 60 percent), it often takes more than one year to complete.

4. Appeals Council

If denied at the hearing level, applicants may file an appeal with the Appeals Council. Fewer than two percent of applications succeed at this stage.

5. Federal District Court

Following a denied Appeals Council claim, the applicant may choose to move the case to Federal District Court. The Court can approve or deny the claim for benefits or send the case back to the SSA for further review.

When should I hire a Preferred Attorney to help with my disability claim?

Although hiring an attorney to assist with the initial claim will save you from the long lines and painstaking paperwork, it is especially important to seek the advice of an attorney if the SSA denies your initial application. Your attorney will understand the confusing rules, regulations, and qualifications and make sure you never miss a deadline.

If the SSA denies the initial application, there is a good chance an administrative law judge will hear the case. Your attorney will prepare you for the hearing, skillfully question witnesses, and argue the appropriate medical and legal arguments.

What does it cost to hire an attorney to help with my disability claim?

Federal law regulates the fee process for Social Security Disability claims. Most attorneys work on contingency, meaning they receive payment when they win your case. The attorney fee may not exceed 25 percent or \$6,000 of your back pay award, whichever is less.

What is the difference between SSI and SSDI?

Both SSI and SSDI provide cash benefits for disabled individuals, but the financial eligibility requirements are quite different. SSI is needs based, while SSDI is awarded based on the number of work credits the applicant has acquired.

Do I have to sell my home before I can receive SSI benefits?

Your home does not count toward the SSI resource limit. A BIAA Financial Issues Preferred Attorney is the best person to look at your income, assets, and work history and give you advice.



1(800) 992-1149 | paterehab.com
Dallas, Fort Worth and Anna, TX

**Rebuilding
your life after
injury...**



Brain Injury and Stroke Rehabilitation

We utilize patient skills and goals as tools for recovery to achieve results that transfer back to the real world



- Over 30 Years of Specialized Experience
- Inpatient, Outpatient and Supported Living
- Maximum Amount of Therapy Hours Daily
- Family Counseling and Respite Services
- Evidence Based Therapies and Activities
- Fluency in Spanish Language and Culture
- Long Term Care on Pate's 89-Acre Ranch

**Pate offers the
full spectrum of
care to meet your
individual needs**



**BRAIN INJURY
ASSOCIATION**

OF AMERICA - TEXAS DIVISION

Brain Injury Association of America, Texas Division

P.O. Box 95234

Grapevine, TX 76099

1-800-444-6443